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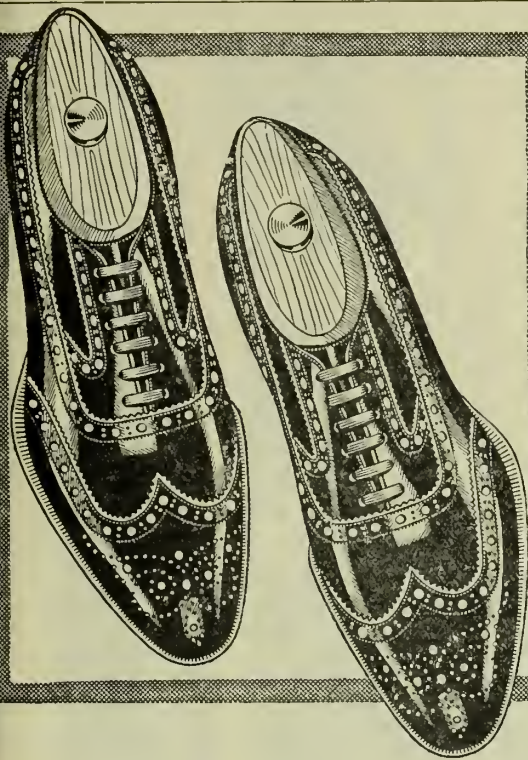
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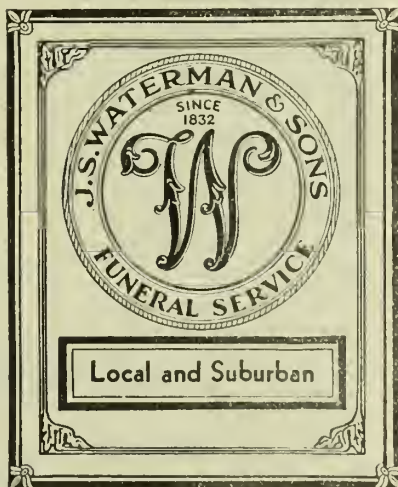
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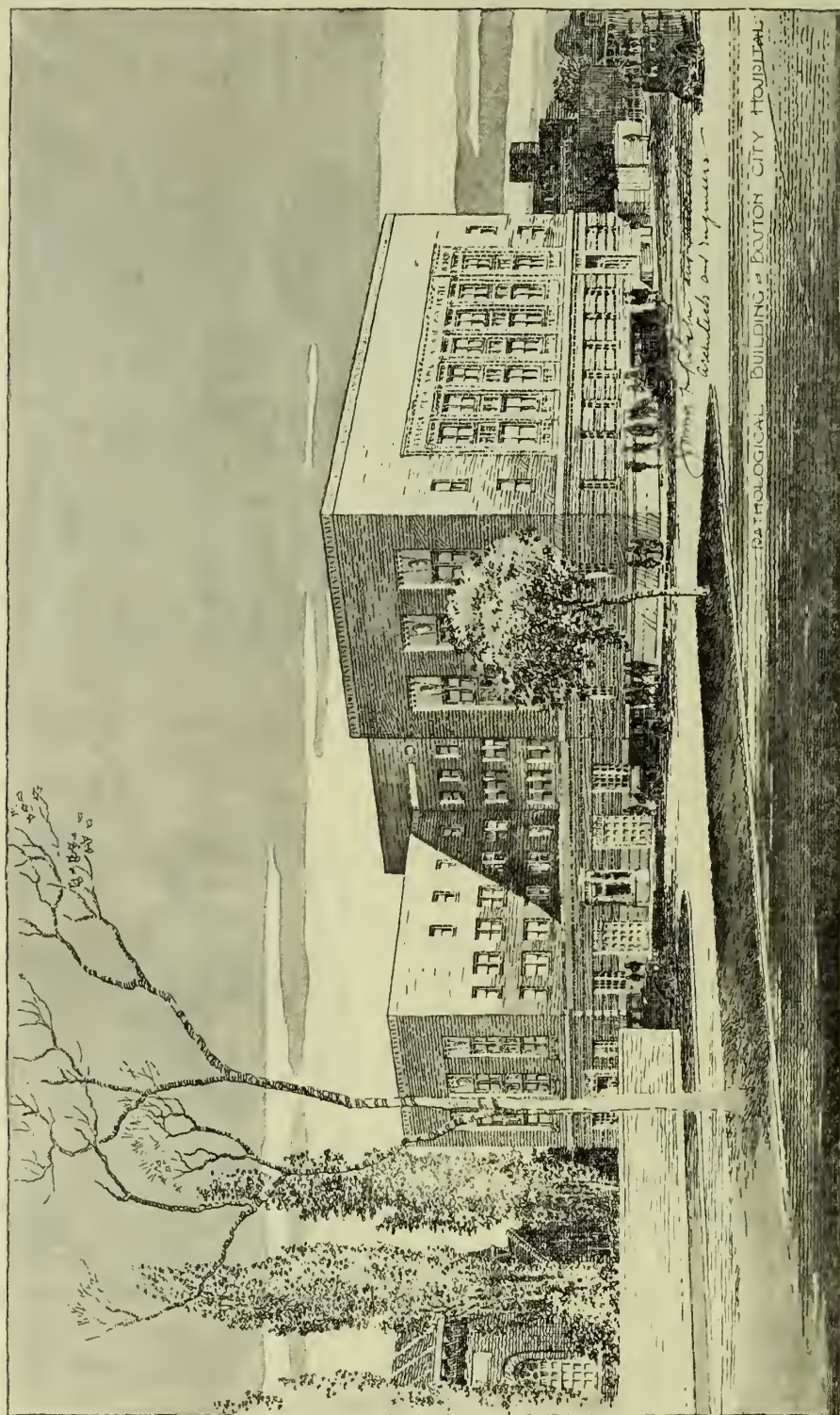
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Sesquicentennial of the Harvard Medical School

THE Harvard Medical School celebrated on October 6 and 7 the 150th anniversary of its foundation. The exercises in Cambridge on the morning of October 7 repeated in part the exercises held at the college on that date, 1783, when Dr. John Warren and Dr. Benjamin Waterhouse were appointed to the first professorships in medicine established by the Harvard Corporation.

Nearly five hundred alumni assembled in the College yard, and the gentlemen of the Corporation, the Board of Overseers, and the Medical Faculty assembled in front of Harvard Hall. At half past ten o'clock, "upon the tolling of the bell," and to the colonial music of drum and fife, the procession, formed in the usual academic manner, marched to Sanders Theater; its path being lined for a considerable distance by medical undergraduates.

President Conant's address (his first public utterance before an audience representative of the Harvard Medical School); the English translation of Dr. Warren's oration which was read by Dr. J. Lewis Bremer, his successor at the School; the somewhat abridged English translation of Dr. Waterhouse's oration which was read by his successor, Dr. Henry A. Christian; and the address of Dr. Lowell, President *Emeritus*, are printed below.

INAUGURAL ORATION OF JOHN WARREN

Most honored Gentlemen:

When I consider that my appearance in this noble building and before this distinguished assembly has been made possible through your indulgence, I cannot doubt that generosity of spirit that has always been so characteristic of you on this ex-

traordinary occasion, to which I am little accustomed.

Everyone who has a real love for the Liberal Arts must also take the keenest interest in the study of Physics, or the Natural Sciences, and rejoice in the advances made in these subjects in our present times. Every part of Europe is full of activity in the field of Experimental Chemistry, so that scarcely a wind blows from that quarter that does not carry with it tidings of new discoveries. In no lesser degree the Science of Botany lays claim to renown for new advances, especially for the most excellently arranged nomenclature of Linnaeus. The Science of Natural History also is on the verge of great developments, as evidenced both by the great collections of books on the subject and by the investigations concerning the structure of animals diligently pursued by the French philosophers; from whose industrious labors has been born a new classification, and a division of species according to structure, highly perfected, into orders and sub-orders. And now the Science of Comparative Anatomy, first fostered by the Greek philosophers, Plato and Aristototele, before they ventured to explore the human fabric, has become rejuvenated through the accomplishments of such renowned scholars as Hume in England, Cuvier and Dumeril in France, Blumenbach and Camper in Germany, so that it has been built anew from its very foundations.

Here in America, our native land, the outlook for the future of the Natural Sciences is not discouraging. Everywhere burns the desire for the promotion of learning, through Academies and libraries; and if we may not as yet gaze upon the sacred groves of learning as actual Academies and

Lyceums, yet we may see that learning in the form of books from the older Academies and learned societies, which will afford manifold opportunities for examining and pondering the new opinions and discoveries of Europe. This is no small advantage; for in this country of ours, all too limited as yet in cultural attainments, it is not the part of wisdom for our students to dissipate their energies in the search for new facts, but rather to reflect deeply on the fruits that have been cultivated by other hands. In this Republic, and in our own University of Harvard, the Natural Sciences already flourish most particularly. The Botanical Garden, blooming in the gayest hues, revels in innumerable plants, indigenous and European, and rejoices in the splendor of both the Indies.

A new College of Medicine, upraised on no high pinnacle, but with a broad foundation under the ample wings of the University, is now made ready for the useful art of healing. A magnificent collection of instruments of Natural Philosophy, removed from the obscurity which they have formerly endured, now shines resplendent in the ample hall. In addition, many faithful reproductions of the human body are to be seen, which only lack a theater adequate for their proper display. If with all this we might increase her renown for a learning already great, no Academy should be more worthy of praise than ours. Oh! light of our Fatherland! Oh! glory of our Alma Mater! Thrice fortunate, yea more, are they who by thy light shall gather the flowers of learning and science, if they realize their opportunities.

That my good fortune and your favoring opinion, most worthy Gentlemen, should have cast an unmerited lot for me at this propitious season, fills me with great joy; but greater is my pleasure that I take my place among colleagues whom I recognize as highly learned and most sympathetic. My greatest delight is that this office is received from your hands, most reverend Master, at once our patron and our pride.

It is not in my heart to waste meaningless words; but since I have had long experience of your kindness, of your vigilance, of your patience in giving ear to and practical knowledge in administering the whole field of Sciences, I cannot forbear to render you our praise and thanks. May the rewards of your services, the teeming fruits of your labors, the veneration of all, and our highest devotion be heaped upon you in abundant measure.

INAUGURAL ORATION OF BENJAMIN WATERHOUSE

Inasmuch as I have lately received the dignity of being called to give public instruction in the New Harvard School of Medicine and now, in company with my colleague of Surgery and Anatomy have been solemnly inducted as a Medical Professor, it is incumbent upon me, before entering on my duties, to pronounce the customary greetings and to pay the thanks that I owe.

Worthy Gentlemen of the Corporation and of the Board of Overseers, I first compliment you. Often in times past, you have proved yourselves munificent patrons of the College of Cambridge. On this occasion I have every reason to declare my deepest admiration for you since by your authority you have seen fit to direct the reputation of the College to increase by the addition of a Medical Institution. On this accomplishment I congratulate you, too, Sir, our President, most charming, most learned of men, distinguished both by the gravity of your office and the splendor of your erudition, a light of the College that shall ever be venerated.

I bring my greetings to you, worthy professors and my amiable colleagues, and to you, also elect circle of studious youth, the hope of our Country, the source of our anxiety and of our love. And finally, kindly auditors, I pray for you that everything be auspicious and well.

To a certain extent, it is possible to perceive righteousness in Warfare if one con-

siders the matters to which a people driven into combat may devote their attention immediately after the struggle is ended. When the citizens of the Dutch Republic, one of the most prudent States of our age, after exercising great valor and enduring the severest exertions, had finally secured possession of their own government, they straightway took care to establish Medical Schools in their Universities. This step led their people to give attention to literature and to endeavors that Thought and Virtue should flourish throughout the land. Hope of these attainments had been the object of their battles and had supported the citizens of this Republic during their period of strife.

If these accomplishments are reasons for praising the Dutch, it follows that we as citizens of America deserve a greater praise. When we were oppressed by War and by its accompaniments, Poverty and Death, when the enemy was without and the traitor was within our walls, when our bonds of union were lax and almost dissolved, when Hope only was left, the fact that in the midst of such threatening evils we took occasion to cultivate the Liberal Arts is surely more than could have been expected and easily surpasses every example. And yet during a period of great confusion and during a time when all tranquillity and leisure were absent, Colleges and various learned Societies were founded in our midst. Among dire calamities there always shone somewhere in this country the hope of re-establishing the Arts; and now under Harvard's auspices, a School of Medicine has put forth its head. There can be no doubt that our deeds in this age will be remembered for a long time. Authors in future will not fail to admire the men of America who, unmoved by the swords or insults of their enemies, devoted their energies to the restoration of Letters as well as to the establishment of an independent Republic.

Now that the storm is over and we have acquired leisure and liberty, let us remember that a Medical School is the strongest

defence against Illness, that common ravager of all nations, for it is the function of the Medical Profession to preserve those who are in health, to strengthen those who are weak, and to restore if possible or at least prolong the lives of the dying.

The adequate teaching of Medicine, which is the topic of my address, embraces the subjects of anatomy, chemistry, the science of herbs, and the knowledge to be gained from the whole of Nature. Since the practice of Medicine is so important and inclusive a profession, I entreat you in your amiability to listen attentively to my brief remarks on this Art.

Both reason and history indicate that in ancient Times our knowledge of Medicine was founded on experience. The theoretical side of treatment was developed later and was discussed in debates or colloquys. Experience or the so-called empirical part of Medicine appeared to yield less uncertain knowledge, for when the conditions of disease are the same the results of disease are the same. On this account it is very probable that the writings of Hippocrates, the books of Galen, of Celsus and of the other ancient physicians have been preserved to posterity. Such writings relate largely to the practice of Medicine and describe clearly the lessons to be learned from clinical observation.

The industry of modern days has discovered many new facts about the composition of the body. Much still is hidden and will probably remain long hidden. None the less, who ever wishes to compare the ancient physician with the modern must admit the superiority of the modern, taking into consideration our present-day knowledge of anatomy, chemistry, surgery, botany and physics, remembering the new remedies that have been devised and the old ones discarded because of their unpleasantness or the discomfort involved in their application. Nothing is more useful or essential to a doctor than a knowledge of anatomy in order that he may obtain a lucid conception of the functions of the human body whether it be healthy or dis-

eased. Anatomy explores diseases, it reveals their hidden retreats and often brings to light their causes. Who, kindly auditors, could have known anything about rupture of the heart unless this disorder had been discovered by anatomical investigation? Who could have discovered the lacteal vessels, the irritability of the heart and other muscles, the peristaltic motion of the intestines if there had been no anatomical studies? Anatomy, always, must remain the primary foundation of Medicine.

Botany, little known to the ancients, has been so cultivated at this time that there is not a plant which cannot be easily recognized from definite marks affixed to it by the Creator. Nor has chemistry been less useful to Medicine. By the aid of chemistry the latent curative powers of substances hitherto unknown have been made manifest. Quinine, for example, a most effective remedy unfamiliar to the ancients, has submitted to the service of mankind. Thus our knowledge of Pharmaceutics has been signally advanced through chemistry. No doctor can disregard the usefulness of chemistry if he wishes to avoid great errors in the administration of his remedies. And how difficult it is to avoid errors when the chance for making them is so great! How frequent are the fallacies encountered!

Nor can the motions of living beings, surely, be explained without an accurate knowledge of Physics. Who can explain the nature of respiration if he does not understand the nature of air? Who can explain the operation of sight when he is ignorant of the nature of light and is unacquainted with the laws of its radiation? Who can deal with the subject of hearing, without having studied Pneumatics? Bodies of animals are not unlike those machines which are described as hydraulic, in which diverse humours come and go as in a circle, with great speed, perpetual motion, and in incredible volume. Thus whatever pertains to mechanics or hydrostatics combines in some fashion with Medical education.

Where can the precepts of all these

sciences be taught with greater profit than in Harvard College? I should like to pursue this topic further, but time forbids. On another occasion and in our broad and beloved Yard, I shall gladly expatiate upon it.

"Men," says Cicero, the parent of Roman eloquence, "approach God most closely when they serve other men." What is more human, more worthy of man and Christianity than to help the weak, the diseased and the suffering? It is to be lamented that the field of Medicine which treats of mental illness and of cures for the mentally diseased is still so uncultivated and so deserted that it is almost non-existent. The dignity of the argument commands, the progress of Medicine persuades and the love of the Human Race should compel Harvard University to commence the investigation of means to combat such illness.

Sagacious and learned President, generous members of the Corporation and Board of Overseers, I trust that nothing will be nearer to your hearts and dearer to your honor than Harvard College. From its founding, in every wise man's judgment, Harvard has been of extreme usefulness, glory and help to the whole American Republic. May the College, day by day and forever, make signal progress. To you gentlemen, fathers of your Country, my friends and benefactors, has been given the privilege of advancing the Medical Sciences. You deserve great praise for having established a Medical Institution here.

College of Cambridge, permit me an adopted son to address you as mother. May you ever proceed on your way serenely and like the rising sun diffuse your light even to the extreme recesses of the Republic.

INTRODUCTION BY PRESIDENT CONANT

The past twenty-five years have been the most brilliant in the history of the Harvard Medical School. This has been due, in no small measure, to the guiding hand

of the President of the University during that period. We all delight to honor one who has done so much for Harvard University and the Medical School. We rejoice at the opportunity of hearing him again this morning. President Lowell.

**PRESIDENT *Emeritus* LOWELL'S
ADDRESS**

To ask anyone who has had no experience whatever with the School of Medicine, and very little as a patient, to address the alumni and teachers of this School, is to give one a task. However, I accept the task. Even the ignorant may take an interest in the problems of education in the Medical School, a subject of intense interest because it is the most difficult of all the professional schools of the University.

Nature is coy; she yields her secrets only to those who seek them earnestly and assiduously, and she yields them only bit by bit. This is fortunate, because if man were possessed of all knowledge and there were no more to obtain, his intellectual powers would atrophy and the world would become static.

Once in a while, indeed, it is given to some person peculiarly favored to get a wider and a deeper view which amplifies some detail: Kepler, for instance, who is responsible for our present theories with respect to the planets; Darwin, who relieved us from the enormous amount of learning as to the classification of animals by explaining that they were all examples of a particular type; the great doctrine of the eighteenth century of the conservation of matter; and that of the nineteenth century, of the conservation of energy, which greatly simplifies things.

Here, within a hundred years, what has been learned about electricity, chemistry, bacteriology, and many other subjects has increased enormously the range, and the result has been an accumulation of vast stores of partly assimilated and largely underrated knowledge.

This has been particularly true of medicine. As we hear good old Dr. Water-

house's description of how much a physician had to know, we laugh—no; we don't laugh at the good old man; we smile because we feel how little he knew about the abundance of information a man must control today. It looks to us like child's play as we hear him.

Moreover, medicine involves many sciences bearing on the normal pathological functions of life, which are most diverse. What does the ordinary student in the Medical School know about the connection between anatomy, chemistry, bacteriology, and so forth? These are difficult subjects, learned to be forgotten, very difficult to retain, because the matter does not work up into anything that the student can see as a connected system. The detailed knowledge of the members of the Faculty of Medicine at the present time is far beyond the capacity of any single one of those gentlemen. Years ago William James remarked of the Faculty of Arts and Sciences, that their aggregate ignorance was encyclopedic.

If this be so, that no one of these gentlemen is capable of knowing all that they ought to know in the aggregate, the question is natural, "How can knowledge be taught that is too extensive to be known by anyone?"

That is one of the problems of medicine at the present date and one of the problems of all education. In the Medical School it cannot be solved, as it is very frequently solved in general education, by saying "Let one man study history if he likes it, and another literature, and the third biology." We cannot say to one practitioner, "Know only anatomy," to another, "Know only protozoa" and to a third, "Know only pharmacology." It would be like the undergraduate who was asked to write on Chinese philosophy and who read the encyclopedia article on China and the article on philosophy and combined the information. In the case of medicine who is to combine the information? The patient?

Physicians do indeed specialize. Of

course they do. But they must all have a thorough medical education. And amid the mass of knowledge we must make a selection of the amount to be taught in each of the many indispensable subjects.

Let us take a view backward. Perhaps there is a revulsion against the earlier theories and practices in education and the tendency to indulge in fantastic discussions about such things as how many angels could stand on the point of a pin. Partly because of our material advance and the spread of schooling to the whole community, the demand is growing for instruction in useful knowledge, and one is often asked what is the use of studying this and that. And that takes the turn of regarding information as the object of education until we think too much of learning facts and too little of using thought.

Facts are essential in many ways. Even facts that will never be remembered have their effect. It used to be said that every English gentleman should have forgotten Greek. There is some sense in that. Nevertheless, for the sake of the power of thought acquired thereby, many facts must be learned and many experiments performed that will never be repeated.

After all, the goal of all education is not the amount of isolated facts retained, but the capacity to apply principles to conditions as they arise. Therefore, the tendency in medical education today is in the direction of inculcating a firm grasp of principles which are generally applicable, with less stress upon special information. What will be later needed can be gained through other sources.

We have tried in the Medical School to reduce the amount of study of the specialties in favor of the general principles of medicine. It is the part of wisdom to know the line between the general knowledge of medicine and these special matters which are valuable not so much in themselves but by the light they cast on the whole. Moreover, the fact that medicine rests upon so many sciences apparently unconnected, makes it especially important to

see their relation to each other, so that the student can understand their bearing on the whole, instead of learning and partially forgetting long series of specialized subjects.

With this object in view, we introduced at Harvard many years ago a general examination, not—as it was at first thought by some—in the sense of review, but as a standard that would involve a correlation of all that had been learned.

Medical knowledge has not only increased enormously within recent times, but it will continue to increase and increase still more. And it will increase in directions that cannot now be foreseen. If they could be foreseen, we should know them now.

Practising physicians are now called upon to use knowledge that did not exist when they studied their profession. That has been the experience of everyone who has been out of the Medical School over ten years. What did the men who graduated in the seventies know about bacteriology? What did they know about insect pollen? What did they know about the million things that have come up since and which they have had to use?

I have spoken about teaching a subject about which nobody can know everything. Now I want to ask how students can be taught things that their teachers do not and cannot know. That is merely another way of stating one of the problems of all modern higher education.

We have courses for graduates. They are good so far as they go. But, in the first place, they are availed of by only a small part of the profession, and, short as they are, they are insufficient unless the men who attend them are prepared by previous education to assimilate their ideas. That is true not only of the Medical School but of all our professional schools.

In short, the student must be given such a comprehension of the science of medicine that its implications and the application of new developments will be accepted by him as an extension rather than a subversion of what he has learned. He must know how

to seize upon them in medical journals and reports so that he can make them his own and use them.

The object of a medical school is not to train practitioners merely, but to train investigators also. Let us observe that the useful assistant is not always the original thinker. They may or may not come together. Sometimes, it is true, the man destined to make great discoveries is useful to his chief while he is young, but the man who is useful is not always the man with great originality. To be original requires imagination. Ah, that is the essential, how to stimulate the imagination. Mere erudition will not do it. The art of provoking the imagination and the conditions that most foster its growth have as yet been imperfectly studied. Perhaps in its nature imagination is elusive. Yet it is the finest fruit of a university.

PRESIDENT CONANT'S ADDRESS

Exactly 150 years ago the Governing Boards met near this spot to induct into office the first Professor of Anatomy and the first Professor of the Theory and Practice of Physic. We are gathered together this morning to commemorate that event.

By this commemoration we celebrate the 150th anniversary of the founding of the Harvard Medical School. During the last century and a half, Harvard men have made notable contributions to the theory and practice of medicine. Today the School is one of the great centers of medical research and education. Harvard congratulates itself on these triumphs, and looks with confidence to a still more brilliant future.

Now there are some interesting considerations in connection with the timing of this celebration which has been arranged for eleven o'clock, instead of twelve o'clock as in 1783. In spite of this discrepancy of one hour, my statement that it was exactly 150 years ago that the induction took place is accurate to within one ten-thousandth of one per cent. Such precision is fantastic! Indeed, I have never been able to see why historians were so meticulous

about dates, since history is admittedly not an exact science.

Especially when one considers the date of the founding of the Medical School, certain difficulties immediately become apparent. On September 19, 1782, the Corporation adopted a report embodying a plan for the formation of the School. On November 22 they voted to elect one professor, John Warren; and on December 24 they elected another professor, Benjamin Waterhouse; and on May 22, 1783, Aaron Dexter. Then in the following October two of the professors were installed. It seems clear that the exact birth of the Medical School cannot be given with an accuracy of more than one year in 150. If you will admit a similar percentage of error in another case, I may also state that Harvard College was founded 300 years ago today. And this rational treatment of chronology enables us to feel that this occasion has a historical symmetry which would otherwise be lacking.

Although Harvard College is twice as old as the Harvard Medical School, the most significant part of its history coincides very closely with the development of the Faculty of Medicine. Since you are allowing me to celebrate this morning not only the founding of the Medical School but also the 300th birthday of Harvard College, I should like to dwell on the significance of the Medical School to the University.

The development of the Medical Faculty was the first step in changing Harvard College into the famous University which it has now become. Until 1810 the instruction in Medicine continued in Cambridge. At great personal sacrifice, the Boston doctors who had been elected professors came here to give their lectures. At the time of their election, there were only three other professors in the College; these were the Professors of Divinity, Mathematics, and Oriental Languages. The Faculty was heavily weighted on the side of Medicine, and the influence of the new members on the intellectual life of the College must

have been of the greatest significance. How much this was appreciated by the whole student body may be judged from the fact that the undergraduates protested vehemently when the Medical Faculty left Cambridge.

The lack of clinical facilities was a handicap to the development of the School, and so, after 27 years of Cambridge sojourn, the Medical School moved to Boston. The transfer was undoubtedly necessary for the proper development of the School, but it must always be regretted by the University at large. A stimulating and important influence was withdrawn from the College.

During the period that followed the migration to Boston, the connecting thread between the Medical Faculty and Harvard College grew more and more tenuous. Indeed, the Medical School was essentially a separate institution for many years until Harvard University came to life as a real living entity under the guidance of President Eliot. Since that time, although the instruction in Medicine continued in Boston, the connection between the Harvard community in Cambridge and the Medical Faculty has become increasingly close. It seems to me a particularly good omen that this celebration of the founding of the Medical School is held here in Cambridge, and I hope it may foreshadow a still closer drawing together of the scientific activities on both sides of the Charles.

In a university it is essential that those who are devoting their lives to one specialty may have the privilege of being associated with the leaders in entirely different fields. The catalytic value of such associations is incalculable both from the point of view of the Faculty and of the students. This has always been the case and will always continue to be so. Today, more than ever, the relation of medicine to the sciences of biology, chemistry, and physics is very intimate. The scientific departments of the University need the Medical School, and the Medical School needs them. Many of the problems which are engrossing the

attention of the medical profession, both clinically and in the laboratory, are of the greatest importance to general science. I need name only one example: the filterable viruses, now recognized as the cause of a number of the most baffling human diseases. These mysterious substances appear to be on the border-line between living material and the non-living. They seem to be either very complex protein molecules or very primitive living organisms. Obviously their study is a biological problem of major significance as well as of importance in connection with the treatment of many diseases. They may be studied not only with animals but also with plants, since a number of plant diseases are also caused by a filterable virus. Here we have an example of the way in which the modern study of certain practical problems has revealed to the scientist questions of the most fundamental significance.

The scientific departments of a great university are tremendously handicapped if the university has no medical school or if it is at such a distance that there cannot be close coöperation on such problems as these. Fortunately, Cambridge is much nearer Boston than it was formerly. It is no longer necessary to spend several hours in the journey or to cross by an uncertain ferry, as in the days of Dr. Warren. Today the laboratories in Boston and Cambridge are essentially part of one group. We may be certain that this will be of great advantage in the years to come.

A study of the history of the Harvard Medical School shows certain significant changes, all of which point in the same direction. The School was founded by a group of Harvard men whose medical education had been by the way of an apprenticeship; they were in a sense almost amateurs. They were able to devote a large part of their energies to subjects other than their profession and often played an important part in their community as statesmen and soldiers. They had served in the Revolutionary army and had been faced with many surgical and medical problems.

From these experiences grew their determination to found a medical Faculty. However, for these men medicine was largely an art passed on from man to man.

Fifty years ago, when the 100th anniversary was being celebrated, the then recent triumphs of medicine had many of them been perfections in the art, made possible by the great skill and patient study of remarkable practitioners. The laboratory medical sciences were just beginning. A virgin field lay before the medical scientist of that day. One man might then make a revolutionary discovery almost unaided. With rare exceptions this is no longer true today. The great advances which are being made can only be described as a mass attack, and in the future even more research will probably be carried on in this way. It is less interesting, less exciting, and a much less romantic method of scientific progress, but it is certainly not less effective. The fortresses now being stormed could never have been won in single-handed combat.

An excellent example of the modern trend of medical research is afforded by the recent work on vitamins. On an average, almost four papers a day appear on this subject, and investigations are in progress in many hundred laboratories. Within the year the essential chemical nature of vitamin C (the anti-scorbutic vitamin) has been established except for certain details. The credit for this advance must be distributed among at least four laboratories and perhaps a dozen workers. A few years ago a team of six English scientists attacked the problem of the isolation of the anti-rachitic vitamin (vitamin D). They were finally successful, and at almost the same moment a group of workers in a German laboratory arrived at the same goal by another route.

It seems to me perfectly clear that the future advances in all science, including medical science, will be made very largely by coöperative efforts; these must necessarily be informal, and may indeed involve people in different laboratories,

even in different countries. Probably no one advocates a blueprint plan of coöperative research, but coöperation of some sort seems essential. If effective investigations are to be carried on in a modern university, there must be present a group of brilliant men with different skills at their command and with a willingness to aid each other whenever possible. In addition, there should be the possibility of frequent informal meetings to discuss mutual problems. If these conditions are fulfilled, significant research is sure to develop.

We have every reason for confidence at Harvard today. A great medical school is an integral part of a university whose departments have proved their ability to labor together harmoniously and effectively. In teaching and in research the Medical Faculty have written a record of which all Harvard is proud. We salute the distinguished past and turn hopefully to the future.

STATE HOSPITALS

To the Editor:

I believe that the following figures will be "news" to many of our fellows.

An analysis of 4,000 consecutive admissions to the Boston State Hospital, exclusive of deaths and transfers, over a period of ten years, discloses:

COMPLETE HOSPITAL RESIDENCE

30 days or less.....	19%
6 months or less.....	45%
One year or less.....	56%
After 5 years still in hospital.....	15%
After 10 years still in hospital.....	3%

The fact that the recovery rate is more than twice that of some of our best general hospitals, shows that a commitment to a State Hospital is far from being a life sentence, as many people still believe.

ALBERT EVANS, M.D., '01.

Monthly Bulletin, Sept.-Oct., 1933. Published by the Massachusetts Society for Mental Hygiene: "A New Approach to the Mental Health Problem," by James V. May, M.D.

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tance of pathological characteristics, has developed as a somewhat academic field of biology. It may be hoped that the stimulus of Professor Mohr's lectures will do something to bring genetics and medicine closer together at Harvard. With two such outstanding leaders in genetics as Professor William Ernest Castle and Professor Edward Murray East in the Department of Biology, are we justified in completely ignoring it in the Medical School curriculum?

* * *

Student At the meeting of the Council
Sickness of the Harvard Medical Alum-
Fund. ni Association held on September 27, 1933, it was voted to discontinue the Student Sickness Fund. Through this Fund the Alumni Association has paid, or helped to defray, the hospital expenses of needy students falling ill while engaged in Medical School work. The Fund has been in existence for three years; the bills paid during this period have totalled \$1,243.56. Grants from this Fund have been made after careful scrutiny of the finances of the recipients and there can be no question but that it has been a saving measure in many critical situations. There has been a growing feeling, however, that this expense should be borne by the students themselves. An insurance fund to which all students would be required to contribute, at an annual cost per student not in excess of ten dollars, should not be an impossible burden.

This year the financial position of the Association is such that it has been forced to withdraw its support of the Fund even though no other provision has been made to take care of needy, sick students. It is hoped that the action of the Council will bring the situation squarely to the attention of the Corporation and that another year will not be allowed to pass without an economically sound solution of this problem.

Genetics in Medicine.

The Dunham Lectures were delivered this year to enthusiastic audiences who consistently packed the Physiology Amphitheater to the doors. The subject which attracted such throngs was Genetics, presented with lucidity and charm by Professor Otto Lous Mohr of the Royal Frederiks University, Oslo. The extraordinary interest exhibited in the course was undoubtedly due in large part to the vast strides which have been made in the field of genetics in recent years and to the complete absence of formal medical instruction on the subject in the Harvard Medical School. It would appear that now that the importance of the clinical as well as the theoretical aspects of genetics is beginning to be appreciated, that medical men are scrambling to find out what it is all about. In so doing they are disregarding the fact that this infant science has, by the unfortunate accident of its birth in a biological laboratory, never been made to feel quite at home in a Medical School. Even human genetics, which consists so largely of the study of inheri-

The Mallory Institute of Pathology

By Robert N. Nye, M.D.

THE latest addition in the current extensive building program at the Boston City Hospital is the pathological building which was formally opened on December 13, 1933. It is located on the southeast corner of Massachusetts Avenue and Albany Street, and is connected to the Main Department by a tunnel underneath Albany Street. The building has a frontage of 111 feet and extends back 183 feet and consists of a basement, four floors and a penthouse. Above the first floor, the building is U-shaped with the open end toward Albany Street. It contains slightly over 1,000,000 cubic feet of space and was erected and equipped for approximately \$550,000. James H. Ritchie and Associates of Boston were the architects.

The exterior finish is red brick with cast stone trim. Steel framework supports the concrete floor and roof slabs. Ample natural light is supplied, particularly in the laboratories and offices on the second and third floors. Asphalt tile and linoleum are used, respectively, for floor coverings in the corridors and laboratories, while in all toilets, storerooms, autopsy rooms and animal rooms the floors are either granolithic or terrazzo. Natural ventilation is used in the majority of the laboratories, but in such rooms as the amphitheatre, autopsy rooms, animal rooms, mortuary and toilets, forced ventilation is supplied. A generous number of outlets for electricity, gas and compressed air have been placed in all the laboratories and medium pressure steam lines run to all the hoods, sterilizers and stills. A refrigerating plant furnishes brine for cooling the mortuary and the cold rooms. There are two elevators, one for passengers and the other for freight. Practically all of the cupboards, cases and cabinets are movable. All storerooms are

equipped with metal shelving of dimensions adapted to the particular use of the room.

The main and auxiliary mortuaries are located in the basement, and, in conjunction, are two undertakers' rooms, a viewing room and a ramp connecting with a loading platform in the yard. The remainder of the basement is occupied by a photographic unit of four rooms, storerooms and three rooms for the refrigerating machinery, the switchboard and the air compressors and vacuum heating pumps.

The main entrance on Massachusetts Avenue opens into a lobby on the first floor, with which are connected an office, a suite for the night-man and waiting rooms. A museum with an office and laboratory for the curator, storerooms and an amphitheatre occupy the balance of the first floor, with the exception of the space occupied by the ambulance station which opens on Albany Street.

The second floor contains the offices and laboratories of the medical examiner for Suffolk County, South, the upper half of the amphitheatre and a suite for the routine hospital bacteriology and serology, which also includes a media room, sterilizing room, glassware preparation room and storerooms, both ordinary and refrigerated.

The third floor is devoted entirely to routine hospital pathology. In the south wing are the offices and laboratories of the permanent staff, together with a library, slide storage room and rest room for the technicians. In the central portion of the building are rooms for surgical pathology and the technicians and a chemical laboratory. Numerous small laboratories for the assistants and residents, a storeroom for gross specimens and a conference room are located in the north wing.

The hospital autopsy rooms and the main autopsy room of the medical exam-

iner are on the fourth floor. The two wings contain rooms with cages adapted for keeping various kinds of stock animals. All experimental animals are housed in rooms in the central portion of the building and connected with these rooms are food preparation and store rooms, cold rooms and animal preparation, inoculation and operating rooms.

As a fitting recognition of the services that Dr. Frank Burr Mallory has rendered to the Boston City Hospital during the past forty-two years, the Trustees have named the building the Mallory Institute of Pathology. Its purpose is to conduct the routine pathological and bacteriological work of the Boston City Hospital and to investigate the cases referred to the medical examiner's office of Suffolk County, South, the former in conjunction with undergraduate and graduate teaching in the medical schools of Harvard University, Boston University and Tufts College.

MEDICAL EXTENSION COURSES IN MASSACHUSETTS

In September, 1933, the Massachusetts Medical Society began to give organized extension courses throughout the Commonwealth for the first time. As a result of the Society's program, the Harvard Medical School has discontinued active participation in postgraduate extension courses in the Massachusetts area, but will give such courses in other states.

The Massachusetts Medical Society has organized courses in twenty-four centers, extending from Cape Cod to the Berkshires. Fourteen courses are under way and ten more will be initiated after January 1, 1934. The faculty presenting the extension series includes doctors from Boston University, Tufts College and Harvard University Medical Schools, and a few doctors who are not connected with these institutions. The faculty are giving their time, as only expenses are paid; the postgraduate students pay a registration fee of

five dollars for the series of ten sessions. A number of doctors, faculty and students, feel that some remuneration should be paid to the faculty. This is, however, an experimental project in its first year, and the thing of paramount importance is that everyone is enthusiastic about making the courses a success, irrespective of fees or personal convenience.

Postgraduate extension teaching in medicine is not new, as it was first begun in North Carolina in 1916. The Harvard Medical School assisted the state of North Carolina by providing several instructors for this initial work. Since that time the idea has taken form and flourished with varied success in twenty-one states and in all of the Canadian provinces. This type of teaching is closely related to the worldwide adult education movement. In the realm of education this bids fair to improve the social structure of our country and to provide better medical service for all.

LEROY E. PARKINS, M.D., '18.

Secretary of the Massachusetts Medical Society, Committee on Postgraduate Medical Instruction.

DUNHAM LECTURES

Dr. Otto Lous Mohr, Professor of Medicine, The Royal Frederiks University, Oslo, gave the Edward K. Dunham Lectures at the Harvard Medical School on Nov. 20, 22 and 24. Dr. Mohr took as his subject "Genetics and Pathology", covering in his three lectures the following: "Basic Conceptions. Mechanism of heredity and sex determination. Inheritance of pathological states in man. Hereditary factors in pathology"; "Origin of injurious hereditary factors by mutation. Their action as revealed by illustrative cases in human pathology. Lethal factors. Pathology of twins"; "Intersexuality. X-rays and heredity. Alcohol and heredity. The tumor problem. Intermarriage and crossing. Some bearings of genetics on medical practice."

MEDICAL SCHOOL COLLOQUIUM

In the interests of furthering intercourse between the various branches of the University concerned with Medicine, the Medical School Colloquium, discontinued for many years, has been reconvened. Luncheon meetings are being held throughout the academic year in the Bowditch Room of Vanderbilt Hall on Thursdays. The doors of the Dining Hall remain open until 1.30 P. M., but those whose engagements permit are requested to come to luncheon as soon after 1 o'clock as possible. The addresses begin promptly at 1.45 and conclude at 2.20.

President James Bryant Conant opened the season on November 2, speaking on the Chemistry of Hemoglobin.

Announcement of these meetings appears in the University Gazette.

STUDENT EMPLOYMENT

From September 1, 1932 to August 31, 1933, 170 students registered with the Student Employment office of the Harvard Medical School, or 32.7 per cent. of the entire student body. This was an increase of almost 7 per cent. over the number of applicants who registered for employment during the year 1931-1932.

From September 1, 1932 to August 31, 1933, 158 positions were filled. Resignations increased the actual number of placements to 169. Many students filled more than one position during the year, i.e., some first-year students served as waiters in Vanderbilt Hall and collected tickets at the Harvard football games; and some students held winter positions and at the termination of these, obtained summer employment through this office. Thus, 135 students obtained positions through the Student Employment Office.* This was an increase over the year 1931-1932 when 123 placements were made and 103 students aided by positions.

From September 1, 1932 to August 31, 1933, students received \$15,305.66 in cash payments and \$44,374.32 in the form

of maintenance, from positions obtained through this office. The value of the maintenance received is based on figures compiled by the Phillips Brooks House Association of Harvard University, i.e., room, \$225.00; board, \$340.00; and laundry, \$50.00, for the school year of nine months. Thus, 135 students earned, on this basis, a total of \$59,679.98 or an average of \$442.07 per student.

Respectfully submitted,

ELIZABETH W. WETHERBEE
Secretary for Student Employment.

*It is impossible to assist all students who register with the Student Employment Office. For example, a first or second-year student applying for summer employment and offering experience in meat markets or shoe stores is unprepared to serve in a medical capacity because of his brief medical experience; and he is difficult to place because he lacks the "experience" which camps demand of their councillors, and which parents require of companions for their children. Such students usually return to their homes where maintenance costs them nothing and earn what they can in their former positions. Other students limit their applications for employment to "a hospital position", of which the number is limited and selection rests with the doctors in charge.

AN EXPERIMENT IN FRIENDSHIP

In the November 17 issue of the Harvard Alumni Bulletin, Reginald Fitz, '09, describes in an article entitled "An Experiment in Friendship" how he has organized a *Society of Friends of the Medical School Library*. Membership in this Society includes all who are interested in the Medical School Library—"the initiation fee is voluntary: all one has to do to become a member is to express the desire." With his characteristic enthusiasm Fitz has aroused keen interest in and active support for the Library. A number of fine books, otherwise impossible to obtain, have been given by Friends and the class of 1908, at its twenty-fifth anniversary meeting, voted to contribute to the School the sum of \$1,000, the income of which is to be used by the Library. J. M. F.

NECROLOGY

'69—ALPHONSO HOLLAND CARVILL died at Somerville, Mass., November 3, 1933.

'75—GEORGE LIVINGSTONE ELLIS died at Middleboro, Mass., August 22, 1933.

'75—ROBERT PEARMAIN LORING died at Newton Centre, Mass., October 28, 1933.

'80—WILLIAM BENJAMIN JACKSON died at Cambridge, Mass., October 6, 1933.

'80—HERBERT PERRY JEFFERSON died at Boston, February 15, 1933.

'81—JAMES HOVEY BULLARD died at Los Angeles, Calif., September 20, 1933.

'82—ROSWELL WETHERBEE died at Belmont, Mass., July 1, 1933.

'86—WILLIAM HENRY DANFORTH died at Boston, November 13, 1933.

'86—ROBERT HOLMES GREENE died at New York City, August 28, 1933.

'86—GEORGE LYMAN RICHARDS died at West Dennis, Mass., November 9, 1933. He had been president of the American Laryngological, Rhinological and Otolological Society and was editor of its transactions for many years. He had also been a member of the prudential committee of the American Board of Commissioners for Foreign Missions. He made two trips around the world for a medical survey of missionary work, and served in 1919 as director of medical work of the Near East Relief Expedition to Turkey.

'91—LYMAN ASA JONES died at Norwood, Mass., October 26, 1933. He was the first superintendent of the State Cancer Hospital at Pondville.

'92-'94—JOHN ADAMS died at Boston, August 21, 1933.

'92—JOHN F. O'BRIEN died at Mattapan, Mass., October 27, 1933.

'92—ALEXANDER QUACKENBOSS died at Boston, October 27, 1933. Dr. Quackenboss was Professor *emeritus* of Ophthalmology at Harvard Medical School and had been a practising physician in Boston since 1893. He served in the World War with the Harvard Unit of the British forces and retired as major of the medical division.

'94—FRED DREW died at Boston, Mass., October 22, 1933.

'94—GEORGE LEON WEST died at Newton, Mass., November 18, 1933. He served for 28 years as medical examiner for the 7th Middlesex district, and was also medical director and trustee of the Newton Hospital, with which he had been connected since 1897. He had been president of the Massachusetts Medico-Legal Society, the Medical Examiners' Association, the Middlesex Southern District of the Mass. Medical Society and the Newton Medical Club.

'97—ARTHUR HOLMES PARKER died at Lexington, Mass., November 3, 1933.

'03—CHARLES WONSON EVELETH died at New York City, October 8, 1933.

'03—FRANK L. RICHARDSON died at Newton, Mass., November 16, 1933. He specialized in the field of anaesthesia, and had served as head of the anaesthesia department of the Boston City Hospital, and consultant in anaesthesia at the Children's and the Beth Israel Hospitals, Boston. He had also been lecturer on anaesthesia at the Tufts College Medical School.

'04—WALLACE EUGENE HUBBARD died at Boston, August 1, 1933. He was at one time assistant chief surgeon at the Gorgas Hospital, Ancon, Panama Canal Zone.

'06—JEREMIAH JOSEPH CORBETT died at Santa Fe, N. M., August 24, 1933.

'06—BERNARD FRANCIS MCGRATH died at New York, N. Y., October 16, 1933.

'21—FLETCHER JOHNSON TOWLERTON died at Cleveland, Ohio, October 8, 1933.

ALUMNI NOTES

'87—Homer Gage, of Worcester, has been elected a member of the council of the American Antiquarian Society.

'95—Henry D. Chadwick, for the past four years with the Health Department of Detroit, Mich., and at one time superintendent of the Westfield (Mass.) Sanatorium, was given a testimonial dinner at the Copley Plaza, Boston, on Oct. 26, upon his appointment as Commissioner of Public Health of Massachusetts. Frederick T. Lord, '00, presided and John W. Bartol, '91, was toastmaster. Among the speakers were Frederic A. Washburn, '96, retiring director of the M. G. H.; Roger I. Lee, '05, of the Massachusetts Public Health Council and a fellow of Harvard College; William H. Robey, '95, president of the Massachusetts Medical Society; and Kendall Emerson, '01, managing director of the American Tuberculosis Association.

'95—Harvey Cushing has been elected a foreign member of the Royal Society, London. He has received from the American Congress of Physical Therapy one of its awards of merit for 1933, in recognition of his work in developing electro-surgery. He received the degree of doctor *honoris causa* at the ceremonies attending the re-opening of the University of Paris on Nov. 4, 1933.

'95—Elliott P. Joslin was one of the guest speakers at the fourth annual fall clinical conference sponsored by the Oklahoma City Clinical Society held Oct. 30-Nov. 2. His subject was "Diabetes Mellitus and Its Complications."

'95—William H. Robey, president of the Mass. Medical Society, spoke at the meeting of the Essex North District Medical Society, at Andover, October 18.

'96—Robert B. Greenough, consulting sur-

